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CODE OF MEDICAL ETHICS,

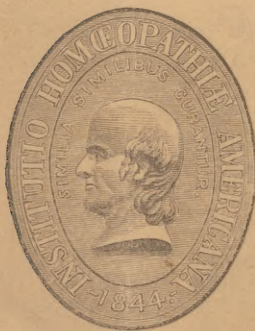
CONSTITUTION, BY-LAWS,

AND

LIST OF MEMBERS

OF THE

American Institute of Homœopathy.



BOSTON :

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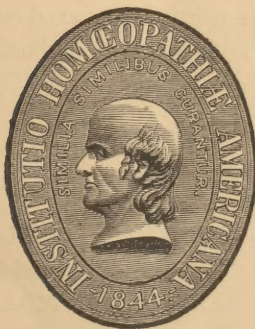
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MAY 1, 1869.



BOSTON :

ALFRED MUDGE & SON, PRINTERS, 34 SCHOOL STREET,
1869.

REPORT ON A COMPLETE CODE OF MEDICAL ETHICS.

ACCEPTED BY THE INSTITUTE AT NEW YORK, JUNE, 1867. ADOPTED AT
ST. LOUIS, JUNE, 1868.

THE undersigned, appointed by the American Institute of Homœopathy a Committee to "prepare a complete code of medical ethics," respectfully present the following as the result of their labors.

Considering it to be very desirable that the codes of ethics adopted by the various associations of the physicians of our country should be uniform in scope and arrangement, and as nearly identical in language as possible, the Committee have used the arrangement, and, to a great extent, the language of the code adopted by the American Medical Association, and published in volume xvi. of their Transactions (for 1865), modifying it where changes seemed to be demanded by a proper regard for liberality and for justice, both to patient and to physician, or by a due concern for the freedom of medical education, opinion and action.

Respectfully submitted.

CARROLL DUNHAM, M.D.,
WALTER WILLIAMSON, M.D.,
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Committee on Medical Ethics.

NEW YORK, June, 1867.

CODE OF MEDICAL ETHICS.

SCOPE.

THE scope of a Code of Medical Ethics comprises the reciprocal duties and obligations of physicians and patients; the duties and obligations of physicians to each other; and the reciprocal duties and obligations of physicians and the public.

FUNDAMENTAL PRINCIPLES.

The great principles upon which Medical Ethics are based are these:

1. The great end and object of the physician's efforts should be: 'the greatest good to the patient.'
2. The rule of conduct of physician and patient and of physicians towards each other, should be the GOLDEN RULE: "As ye would that men should do to you, do ye also to them likewise."

The various articles of the code are only special applications of these great principles.

PART I.

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PART I.

OF THE RECIPROCAL DUTIES AND OBLIGATIONS OF PHYSICIANS AND THEIR PATIENTS.

Article I. — Duties of the Physician to the Patient.

SECT. 1. The physician should hold himself in constant readiness to obey the calls of the sick. He should ever bear in mind the sacred character of his calling and the great responsibility which it involves, and should remember that the comfort, the health and the lives of his patients depend upon the skill, attention and faithfulness with which he performs his professional duties.

SECT. 2. The physician, in order that he may be able to exercise his vocation to the best advantage of the patient, should possess his respect and confidence. These must be acquired and retained by faithful attention to his malady, by indulgent tenderness towards the weaknesses incident to his condition, and by the exercise of a firm but kindly authority. The physician is bound to keep secret whatever he may either hear or observe, while in the discharge of his professional duties, respecting the private affairs of the patient or his family. And this obligation is not limited to the period during which the physician is in attendance on the patient. The patient should be made to feel that he has, in his physician, a friend who will guard his secrets with scrupulous honor and fidelity.

SECT. 3. The physician should visit his patient as often as may be necessary to enable him to acquire and keep a full knowledge of the nature, progress, changes, and complications of the disease, and to do for the patient the utmost of good that

he is able. But he should carefully avoid making unnecessary visits, lest he render the patient needlessly anxious about his case, or expose himself to the charge of being actuated by mercenary motives.

SECT. 4. The physician should not give expression to gloomy forebodings respecting the patient's disease, nor magnify the gravity of the case. Bearing in mind the almost infinite resources of nature, he should be cheerful and hopeful, both in mind and manner. This will enable him the better to exercise his faculties and apply his knowledge for the patient's benefit, and will inspire the patient with confidence, courage and fortitude, which are the physician's best moral adjuvants.

But it is the physician's duty to state the true nature and prospects of the case, from time to time, to some judicious friend or relative of the patient, and to keep this person fully informed of its changes and probable issue; and if the patient himself request the physician to disclose to him the nature and prognosis of his disease, it is his duty to state tenderly, but frankly the whole truth,—provided the patient be of sound mind, and strong enough to receive the disclosure without serious injury. The patient has a right to know the truth. If, moreover, facts within the physician's knowledge lead him to believe that it is of great importance, in relation to the patient's affairs, that he should be warned of the approach of death, it is the physician's duty to reveal to the patient's nearest friend, or to the patient himself, the true state of the case, and the importance of timely action.

SECT. 5. Whether the case proceed favorably, or become manifestly incurable, it is the physician's duty to continue his attendance faithfully and conscientiously so long as the patient may desire it. He is not justified in abandoning a case merely because he supposes it incurable.

SECT. 6. As the patient has an undoubted right to dismiss his physician for reasons satisfactory to himself; so, likewise, the

physician may, with equal propriety, decline to attend patients, when his self-respect or dignity seem to him to require this step; as, for example, when they persistently refuse to comply with his directions.

SECT. 7. In difficult or protracted cases, consultations are advisable. They tend to increase the knowledge, energy, and confidence of the physician, and to maintain the courage of the patient. The physician should be ready to act upon any desire which the patient may express for a consultation, even though he may not himself feel the need of it. Nothing is so likely to maintain the patient's confidence as alacrity in this respect. Moreover, such a course is but just to him, for he has an indisputable right to whatever aid or counsel he may think likely to be of service to him.

SECT. 8. The intimate relations into which the physician is brought with his patient give him opportunity to exercise a powerful moral influence over him. This should always be exerted to turn him from dangerous or vicious courses towards a temperate and virtuous life. The physician is sometimes called to assist in practices of questionable propriety, and even of a criminal character. Among these may be mentioned the pretence of disease, in order to evade services demanded by law, as jury or military duty; the concealment of organic disease or of morbid tendencies, in order to secure favorable rates of life-insurance, or for deception of other kinds; and especially the procurement of abortion when not necessary to save the life of the mother. To all such propositions, the physician should present an inflexible opposition. It is his duty, in an authoritative, but friendly manner, to explain and urge the nature, illegality and guilt of the proposed action, and to use every effort to dissuade from it, and to strengthen the patient's virtue and sense of right. The physician should be aware of the frequency of criminal abortion, and of the different methods employed for it, and should take every occasion to warn those who may be tempted to resort

to it. In no case should the physician induce abortion, or premature labor, without a previous consultation with the most experienced practitioners attainable, nor without the most clear and imperative reasons.

Article II.—Duties and Obligations of Patients to their Physician

SECT. 1. Physicians are required, by the nature of their profession, to sacrifice comfort, ease, and even health, for the sake of their patients. Patients should reflect upon this, and should understand and remember that they have corresponding duties and obligations towards their physicians.

SECT. 2. The patient should select a physician in whose knowledge, skill, and fidelity he can place implicit confidence; whose habits of life are regular and temperate, and whose character and demeanor are such that he can regard him as a personal friend. He must be able to confide in him freely. And the physician should not be changed for light reasons. A physician thoroughly acquainted with the constitutions, temperaments, and tendencies of a family can the more successfully treat them.

SECT. 3. The patient should always consult his physician as early as possible after he has discovered that he is ill. A disease which is trifling at its onset may grow formidable through neglect. The physician should be regarded as a confidential adviser, who, on being early consulted, may prevent a sickness.

• SECT. 4. The patient should faithfully and unreservedly state to his physician the supposed cause of his malady, and tell him everything that may have a bearing upon its nature. Since the physician is under the strongest obligations to secrecy, the patient should not allow considerations of delicacy, modesty, or pride to prevent an entirely frank statement of his case, and candid and full replies to interrogatories.

SECT. 5. The patient should implicitly obey his physician's

injunctions as regards diet, regimen and medical treatment. If he deviate from these directions, he cannot hold the physician to a full responsibility in the case; and, further, by a partial obedience he incurs some personal risk, since, in the treatment of diseases, all parts of the physician's advice are made to harmonize, and each is dependent on the others and may be unsafe without the coincidence of the others. Moreover, he does the physician an undeserved, and often a serious, wrong. If the patient have not sufficient confidence in his physician, and respect for him, to follow his directions, it were better for him frankly to say so, and to employ another in whom he can confide.

The patient should never allow himself, while under a physician's treatment, to take other medicines than those prescribed by him. He would, by so doing, incur a serious risk of taking medicines that are incompatible with each other. If desirous of trying any other mode of treatment, it would be much better frankly to state the fact to his physician, and ask his advice.

SECT. 6. The patient should, if possible, avoid receiving the friendly visits of a physician other than the one under whose charge he is. When he receives such visits, he should avoid conversation on the subject of his disease; for an accidental observation might give him false impressions respecting his disease, or destroy his confidence in the treatment he is pursuing. He should never send for a consulting physician without the express consent of his own medical attendant; for physicians can act together for the advantage of their patient, only when they act harmoniously. Nor should he, by a secret appointment, constrain his medical attendant to meet another physician with whom he might not be willing to consult; but the patient has an undoubted right to have the opinion of any physician whom he may desire, upon his case. His proper course is, to request his medical attendant to arrange a consultation, and frankly state his desire for the physician whom he may prefer. If his medical attendant decline the consultation, it is then for

the patient to determine whether he will insist, and thus dismiss his medical attendant, or whether he will defer to the judgment of his own physician. And the patient has a right thus to choose.

SECT. 7. If the patient wishes to dismiss his physician, he should, in justice and in common courtesy, state his reasons, and, if possible, in a friendly manner. To dispense with the services of a physician need not, of necessity, change the social relations of the parties.

SECT. 8. The patient should, when practicable, send for the physician in the morning, before his usual hour for leaving home. He will, by so doing, secure his earlier attendance, and will enable him the better to apportion his time so as to do justice to all his calls and engagements. He should call on his physician during his office hours only, and should avoid disturbing him in hours devoted to meals, rest and sleep. And in receiving his physician's visits, he should avoid compelling him to wait, even a few minutes. The aggregate of petty detentions, while the patient is making some needless preparation to receive the physician, amounts to a serious waste of valuable time.

PART II.

OF THE DUTIES AND OBLIGATIONS OF PHYSICIANS TO THE PROFESSION AND TO EACH OTHER.

Article 1. — Duties to the Profession.

SECT. 1. Inasmuch as every member of the medical profession partakes of the honor in which it is held, is entitled to its privileges and immunities, and profits by the scientific labors of his predecessors and associates, it is his duty faithfully to endeavor, in his turn, to elevate the position of the profession and, by every honorable exertion, to enrich the science of medicine.

SECT. 2. In no other profession should a higher standard of morality and greater purity of personal character be required. Physicians ought to come up to this standard, and do what they may to exalt it. As the practice of medicine requires the constant exercise of a vigorous and clear understanding, and as the practitioner should be, at all times, ready for emergencies in which the welfare and even the life of a fellow creature may depend upon his steady hand, acute eye, and unclouded brain, it is incumbent upon the physician to be temperate in all things.

SECT. 3. The physician should not resort to public advertisements or private cards or handbills, inviting the attention of persons affected by particular diseases or publicly offering advice and medicine to the poor, *gratis*, or promising radical cures. Neither should he publish cases or operations in the daily prints; nor invite laymen to be present at operations, nor solicit or exhibit certificates of skill and success; nor perform any similar act.

SECT. 4. It is equally derogatory to professional character for a physician to hold a patent for any nostrum or any surgical

instrument or appliance; or to keep secret the nature and composition of any medicine used by him. Such restriction or concealment is inconsistent with the beneficence and liberality which should characterize the medical profession. But it is the duty of the physician to avail himself of every opportunity to observe the action and study the properties of new or secret remedies and new processes of preparing medicines as well as new modes of treating diseases, and to subject them to the analysis of scientific investigation. For the physician should always bear in mind that the great object of his profession is to cure the sick, and that it is not only admissible, but is his solemn duty to investigate, thoroughly and without prejudice, whatever offers any probability of adding to his knowledge of the art and means of curing, and of thus enriching the science of medicine.

Article II. Professional Services of Physicians to each other.

SECT. 1. All practitioners of medicine, their wives, and children while under the paternal care, are entitled to the gratuitous services of any one or more of the faculty residing near them. Physicians, when ill, are incompetent to prescribe for themselves. The natural anxiety and solicitude which they feel for members of their own family when ill, tend to obscure their professional judgment and make it difficult to treat them. Under these circumstances, physicians are peculiarly dependent on each other; and kind offices and professional aid should always be cheerfully and gratuitously afforded. But visits should not be obtruded, officiously or unasked, upon a sick physician.

If, however, a physician, in affluent circumstances, request the attendance of a distant professional brother, and offer an *honorarium*, it is not proper to decline it; for one should not, even from a kindly motive, impose upon another a pecuniary obligation, which the recipient would not wish to incur.

If a physician is called from any considerable distance, the expense of travel, etc., thereby incurred, should always be paid by the physician receiving the visit; and an *honorarium* may be tendered if much time is consumed in making the visit.

Article III. Duties of Physicians as regards Vicarious Offices.

SECT. 1. Attention to his personal affairs, the pursuit of health, and the various contingencies to which the physician is peculiarly exposed, sometimes compel him temporarily to withdraw from his duties to his patients, and to request some of his professional brethren to discharge them for him. Compliance with such a request is an act of courtesy which should always be performed with the utmost consideration for the interests and character of the physician relieved. And, when this is done for a short period only, all the pecuniary obligations for such services should belong to him. But if a physician neglect his business in quest of amusement and pleasure, he is not entitled to the frequent and long-continued exercise of this fraternal courtesy without conceding to the physician who acts for him the fees accruing from the duties discharged by the latter.

SECT. 2. Obstetrical and surgical cases involve unusual fatigue and responsibility; and it is just that the fees accruing therefrom should belong to the physician who attends them.

Article IV. Duties of Physicians in regard to Consultations.

SECT. 1. A complete medical education, of which the diploma of a medical college is the formal voucher, furnishes the only presumptive evidence of professional acquirements and abilities. But the annals of the profession contain the names of some who, not having the advantage of a complete medical education, became, nevertheless, through their own exertions and abilities, brilliant scholars and successful practitioners. A practitioner,

therefore, whatever his credentials may be, who enjoys a good moral and professional standing in the community, should not be excluded from fellowship, nor his aid rejected, when it is desired by the patient in consultation. No difference in views on subjects of medical principles or practice should be allowed to influence a physician against consenting to a consultation with a fellow practitioner. The very object of a consultation is to bring together those who may, perhaps, differ in their views of the disease and its appropriate treatment, in the hope that, from a comparison of different views may be derived a just estimate of the disease and a successful course of treatment.

No tests of orthodoxy in medical practice should be applied to limit the freedom of consultations. Medicine is a progressive science. Its history shows that what is heresy in one century may, and probably will be orthodoxy in the next. No greater misfortune can befall the medical profession than the action of an influential association or academy establishing a creed or standard of orthodoxy or "regularity." It will be fatal to freedom and progress in opinion and practice. On the other hand, nothing will so stimulate the healthy growth of the profession, both in scientific strength and in the honorable estimation of the public, as the universal and sincere adoption of a platform which shall recognize and guarantee:—

1. A truly fraternal good-will and fellowship among all who devote themselves to the care of the sick.

2. A thorough and complete knowledge, however obtained, of all the direct and collateral branches of medical science,—as it exists in all sects and schools of medicine,—as the essential qualification of a physician.

3. Perfect freedom of opinion and practice, as the unquestionable prerogative of the practitioner, who is the sole judge of what is the best mode of treatment in each case of sickness entrusted to his care.

The physician may, with propriety, decline to meet a practi-

tioner of whose inimical feelings towards himself or of whose general unfairness in consultations he is satisfied. But, in such a case, he should explain to the patient his reasons; and if the patient desire the opinion of the practitioner objected to, the family physician may withdraw from the case and allow the other to be sent for. But, in justice to the latter, the state of affairs should be explained to him at the time he is requested to visit the patient.

SECT. 2. The utmost punctuality should be observed in the visits of physicians when they are to hold consultations together; and this is generally practicable, for society allows the plea of professional engagements to excuse the neglect of all others, and to be a valid reason for the relinquishment of any present occupation. But, as professional engagements may sometimes interfere and delay one of the parties, the physician who first arrives should wait for his associate a reasonable period of time, after which the consultation should be considered postponed to a new appointment. If it be the attending physician who is present, he will, of course, see the patient and prescribe; but if it be the consulting physician, he should retire without seeing the patient, except in cases of emergency, or when he has been called from a considerable distance, in which case he may examine the patient, and give his opinion in writing and under seal, to be delivered to the attending physician.

SECT. 3. In consultations, no rivalry or jealousy should be indulged in. Candor, probity, and all due respect should be exercised towards the physician in charge of the case. If the consulting physician cannot agree with him respecting the nature and proper treatment of the case, the physicians should state this fact to the patient, or his nearest friend, both physicians being present at the time, and should request him to select the one in whom he has most confidence. But, if they agree sufficiently to take joint charge of the case, then the consulting physician must justify and uphold, so far as he can conscientiously

do so, the practice of his associate, and must abstain from any hints, insinuations or actions, which might, in any way, impair the confidence which the patient reposes in him, or affect his reputation. He must refrain from any extraordinary attentions or assiduities, calculated to ingratiate himself in the patient's favor and to supplant his associate.

SECT. 4. In consultations, the attending physician should first put the necessary questions to the patient. After this, the consulting physician should make such additional inquiries and examinations as may be needed to satisfy him of the true nature of the case. But he should avoid making a parade of examining the patient more thoroughly than had been done before; rather suggesting to the attending physician, where this is possible, to make whatever examinations he desires, than making them himself. Both physicians should then retire to a private room for deliberation.

SECT. 5. In consultations the attending physician should deliver his opinion first; and, when there are several consulting physicians, they should express their opinions in the order in which they have been called in. Should an irreconcilable diversity of opinion occur, when more than two physicians meet in consultation, the opinion of the majority should be regarded as decisive; but, if the number be equal on each side, the decision should rest with the attending physician. If two physicians, in consultation, cannot agree, they should call in a third to act as umpire. If this be not practicable, the patient must be requested to select the physician in whom he is most willing to confide. The physician who is left in the minority should, without any ill feeling, retire from the consultation and from any farther participation in the management of the case; and, in justice to the physician thus retiring, the fact of his difference from his associates should, in the presence of all the physicians attending, be explained to the patient, as his reason for withdrawing from the case.

SECT. 6. The attending physician should communicate to the patient or his friends the directions agreed upon in the consultation, as well as any opinion which it may be thought proper to express. But no statement or discussion should take place before the patient or his friends, except in the presence of all the physicians attending, and by their common consent. And no opinions or prognostications should be delivered, which are not the result of previous deliberation and concurrence. No decision arrived at in a consultation is to be regarded as restraining the attending physician from making such variations in the treatment as any subsequent change in the case may demand. But such variation and the reasons for it, ought to be carefully noted at the time, and detailed at the next meeting in consultation. The same privilege belongs also to the consulting physician, if he is sent for in an emergency when the attending physician is out of the way; and similar explanations must be made by him at the next meeting.

SECT. 7. Sometimes a special consultation is desirable in cases in which the continued attendance of two physicians might be objectionable to the patient. The consulting physician, in such a case, should sedulously avoid all further unsolicited attendance. Such consultations require an extraordinary outlay of time and attention, and, at least a *double honorarium* may be reasonably expected.

SECT. 8. The consulting physician cannot, with propriety, take exclusive charge, at any time, of the patient in whose case he has been called in consultation, without the consent of the attending physician, except in cases provided for by the third sentence of section 3, and by the fourth sentence of section 5, of this article.

Article V. Duties of Physicians in cases of Interference.

SECT. 1. Medicine is a liberal profession and those admitted into its ranks should base their expectations of success upon

the extent of their qualifications, not upon intrigue or artifice. A physician should not allow himself to feel envious or jealous of a brother-practitioner. The distinction which one successful physician wins is shared by the whole profession. Nor should a physician suffer himself to feel ill-will towards another who may come into his neighborhood and appear likely to take a share of the business which he has hitherto enjoyed. Such feelings are inconsistent with the beneficent and liberal nature of the profession. Liberality, and true generous fraternity in thought, word and deed, will unite the interests of all the members of the profession, and will so exalt the estimation in which it is held in the community that, confidence being increased, business will likewise increase; and to physicians will be accorded the position which, of right, should be theirs: that of confidential family advisers in all matters pertaining to the care of the body in health, no less than in sickness.

SECT. 2. The physician, in his intercourse with a patient who is under the care of another practitioner, should observe the strictest caution and reserve. No meddling questions should be asked in any interview for business or friendship, no disingenuous hints thrown out relating to the nature and treatment of his disorder; nor should the patient be allowed to converse upon these topics. No course of conduct should be pursued which might, directly or indirectly, tend to diminish the trust reposed in the physician employed.

SECT. 3. A physician should not take charge of a patient who is, or has recently been, under the charge of another practitioner in the same illness, except in cases of sudden emergency, or in consultation with the physician previously in attendance, or when the latter has relinquished the case, or has been regularly notified that his services are no longer required. Under such circumstances no unjust or illiberal remarks should be made or insinuations thrown out in relation to the treatment pursued by the previous physician. Nor should the physician permit the

patient unreasonably to find fault with his predecessor. For patients often become dissatisfied with their attendant on account of the mere duration of a case which no degree of professional knowledge or skill could have shortened.

SECT. 4. In cases of accident or sudden emergency, one or more physicians are often sent for by alarmed friends. Courtesy should assign the patient to the first of these that arrives; and he should select from those present such additional assistance as he may deem necessary. But he should also request the family physician (if there be one) to be sent for, and, on his arrival, resign the case into his hands. The practitioner of the patient, when he arrives, should take the place of any one called in his absence. "The practitioner of any patient" is the man whom he has in any way given to understand that he regards him as his medical adviser, or who would now be in charge of the case were it not for his absence, sickness or other disability.

SECT. 5. In a sparse population, a physician when visiting a sick person, may be desired to see, in an emergency, a neighboring patient, who is under the regular charge of another physician. The conduct to be pursued on such an occasion is: to give advice adapted to present circumstances; to interfere as little as possible with the general plan of treatment; to assume no farther direction of the case unless it be expressly desired; and, in the latter case, to request an immediate consultation with the practitioner previously employed.

SECT. 6. A wealthy physician should not give advice *gratis* to the affluent; because his so doing is an injury to his professional brethren. The office of the physician can never be supported as an exclusively beneficent one; and it is defrauding, in some degree, the common fund, when fees are dispensed with, which might justly be claimed.

SECT. 7. When a physician who has been engaged to attend a case of midwifery is absent and another is sent for, if delivery is accomplished in the absence of the former, the latter is

entitled to the fee, but he should resign the patient to the practitioner first engaged.

Article VI. Of differences between Physicians.

SECT. 1. Diversity of opinion and opposition of interests may, in the medical, as in other professions, sometimes occasion controversy and even contention. When such cases occur and cannot be immediately terminated, they should be referred to the arbitration of a sufficient number of physicians or a *court-medical*.

Article VII. Of Pecuniary Acknowledgments.

SECT. 1. Some general rules should be adopted by the physicians in every town or district, relative to pecuniary acknowledgments from patients. These should be adhered to by physicians as uniformly as circumstances will permit. They serve, likewise, as a standard to which appeal may be taken in cases of doubt or dispute.

SECT. 2. Members of the medical profession have been so uniformly in the habit of attending, gratuitously, the indigent sick and, in general, of answering every call promptly, and without a question as to whether they are to receive remuneration therefor, that many persons seem to think they have a right to demand the services of physicians; and do, in fact, call upon them freely, and neglect or refuse to render any pecuniary equivalent, although abundantly able to do so. They impose upon one physician, in this way, until they have exhausted his patience, and then call upon another; and thus, in the course of a few years, make the circuit of the profession in their neighborhood. It is proper for the physicians of a community to make a list of the names of such individuals, and to demand, before visiting those whose names are on it, adequate security that their *honorarium* will be paid.

PART III.

THE RECIPROCAL DUTIES AND OBLIGATIONS OF PHYSICIANS AND THE PUBLIC.

Article I. — Duties of Physicians to the Public.

SECT. 1. As good citizens, it is the duty of Physicians to be vigilant for the welfare of the community, and to bear their part in sustaining its institutions and burdens. They should be always ready to give counsel to the public, in relation to matters appertaining to their profession; as, for example, on subjects of medical police, public hygiene and legal medicine. It is their province to enlighten the public in regard to quarantine regulations, the location, arrangement and dietaries of hospitals, asylums, schools, prisons and similar institutions; in relation to the medical police of towns, drainage, ventilation, etc., and in regard to measures for the prevention of epidemic and contagious diseases. And, when pestilence prevails, it is their duty to face the danger, and to continue their labors for the alleviation of suffering, and the saving of life, even at the risk of their own lives.

SECT. 2. Physicians should always be ready, when called on by the proper authorities, to enlighten coroners' inquests and courts of justice on matters strictly medical, such as involve questions relating to insanity, legitimacy, or sudden and violent deaths, and in regard to the various other subjects embraced in the science of medical jurisprudence. But, in these cases, and especially where they are required to make *post mortem* examinations, it is just and right, in consequence of the time, labor and skill required, and the responsibility and risk they incur, that the public should award them more than a mere consulting fee.

SECT. 3. There is no profession, by the members of which

eleemosynary services are more freely dispensed than they are by physicians; but justice demands that some limits should be placed to the claims upon such offices at their hands. Poverty, professional brotherhood, the benevolent and scantily remunerated occupation of the individual patient, and certain of the public duties referred to in Sect. 1 of this Article, should always be recognized as presenting valid claims for gratuitous services. But neither institutions endowed by the public or by rich individuals, societies for mutual benefit, for the insurance of lives or for analogous purposes, nor any profession or occupation can be admitted to possess such privilege. Nor can it be justly expected of physicians to furnish certificates of inability to serve on juries, or perform military duty, or to certify to the state of health of parties wishing to insure their lives, obtain pensions or the like, without a pecuniary acknowledgment. But to indigent persons, such professional services should always be cheerfully and freely accorded.

Article II. Obligations of the Public to Physicians.

SECT. 1. The benefit accruing to the public, directly and indirectly, from the active and constant labors and beneficence of the medical profession are so numerous and important that physicians are justly entitled to the utmost consideration from the community. The public ought, likewise, to entertain a just appreciation of the proper qualifications of a practitioner of medicine; to make a due discrimination between true science and the assumptions of ignorance and empiricism; to afford every encouragement and facility for the acquisition of medical education, and not to allow the provisions of their statute books or of the prospectus of their chartered institutions to interpose any obstacles to the attainment of the fullest knowledge of every branch of medical science, or, in any way, to restrain the most entire freedom of thought, investigation, and action in matters appertaining to the practice of medicine.

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THE AMERICAN INSTITUTE OF HOMŒOPATHY.

THIS Association was organized in 1844, since which time it has held twenty-one sessions in the different cities of the Union. As it is a national association, with members in nearly every State, it is desirable that all the State and County societies, hospitals, asylums, infirmaries, dispensaries, colleges, journals, and all associations or institutions under homœopathic control, should be represented by delegates, and report annually. The consideration of all medical questions of national importance properly belongs to the Institute, and every homœopathic physician in the country should be a member. Its professional work is divided among six bureaus, which embrace the various subjects pertaining to the science of medicine. These, with the committees already appointed on special subjects and the officers of the Institute, constitute a working force of more than one hundred, through which every subject of importance to the medical profession can be presented to, and considered by the Institute.

The Transactions of 1867 and 1868, furnished gratuitously to the members, have respectively four hundred and fifty, and six hundred pages, and contain information not to be derived from any other source. The usefulness and importance of this association will undoubtedly increase with its rapidly increasing number of members.

CONSTITUTION, AND BY-LAWS.

CONSTITUTION.

ARTICLE I.

THIS Association shall be styled the AMERICAN INSTITUTE OF HOMŒOPATHY.

ARTICLE II.

The object of the Institute shall be the improvement of the science of medicine.

ARTICLE III.

The Institute shall be composed of those physicians who are already members, and of such others as may be hereafter duly chosen in conformity with its By-laws.

ARTICLE IV.

The officers of the Institute shall be a President, a Vice-President, a General Secretary, a Provisional Secretary, and a Treasurer, with such other officers as shall be designated by the By-laws, to be chosen at such time, in such a manner, for such a period and with such duties, as those by-laws shall ordain.

ARTICLE V.

The Institute shall have and use one common seal, with a suitable device and inscription.

ARTICLE VI.

This Constitution may be altered or amended by a vote of two-thirds of all the members present at the regular annual meeting, provided that notice of such alteration or amendment shall have been given in writing at a previous annual meeting of the Institute.

 BY-LAWS.

ARTICLE I.

The Institute shall hold at least one session in each year, at such time and place as may be determined upon from time to time.

ARTICLE II.

SECT. 1. The officers shall be elected at each session by ballot, and shall remain in office until others are chosen.

SECT. 2. The officers of the Institute — viz, the President, Vice-President, General Secretary, Provisional Secretary, and Treasurer — shall constitute an Executive Committee, which shall arrange the order of business at the meetings of the Institute; attend to matters of business not otherwise specially provided for; and perform such other duties as may by vote of the Institute devolve upon it. It shall also constitute the Publication Committee.

ARTICLE III.

The President shall preside at the meetings of the Institute, preserve order therein, put all questions, announce the decisions, and appoint the committees not otherwise ordered.

ARTICLE IV.

The Vice-President shall assist the President, and, in his absence, perform his duties.

ARTICLE V.

The General Secretary shall keep a record of the proceedings of the meetings; answer all letters addressed to the Institute; open and maintain such correspondence as may tend to advance its interests; give proper notice of the meetings of the Institute; notify candidates of their election; and sign certificates of membership.

ARTICLE VI.

The Provisional Secretary shall assist the General Secretary, and, in his absence, perform his duties.

ARTICLE VII.

The Treasurer shall collect all moneys belonging to the Institute; make all necessary disbursements; and report annually in writing.

ARTICLE VIII.

At each session of the Institute there shall be elected, by ballot, a board of five Censors, who shall receive and examine the credentials of candidates, and report to the Institute, for election, such as may be found properly qualified.

ARTICLE IX.

SECT. 1. Any person who shall have pursued a regular course of medical studies, according to the requirements of the existing medical institutions of our country, and shall have obtained a certificate of three members of this Institute that he has thus complied with the above requirements, and sustains a

good moral character and general standing, — addressed to the Board of Censors, and by them satisfactorily found qualified in the theory and practice of homœopathy, and so reported to the Institute, — may be elected a member thereof; and, upon the payment of two dollars, shall receive a certificate of such election.

SECT. 2. Properly accredited delegates, being physicians, shall be admitted during the session of the Institute to all the privileges of members, except voting and eligibility to office, on the following basis :

First. From every association composed of more than fifty members from different States, two delegates, with an additional delegate for every twenty members.

Second. From every State society, two delegates, with an additional delegate for every twenty members.

Third. From every county or local society, one delegate.

Fourth. From every college, hospital, or dispensary actually established, one delegate.

Fifth. From every medical journal published, one delegate.

Such delegates shall be elected for the term of one year.

It shall be their duty to present to this Institute, through its proper bureaus, a clear synopsis of the doings of their respective associations.

SECT. 3. Of State societies represented in the Institute, the Presidents shall be *ex officio* Vice-Presidents, and the Recording Secretaries shall be *ex officio* Corresponding Secretaries, of the Institute. It shall be the duty of these officers to communicate to the General Secretary any facts or information concerning the condition of these societies, and the progress of homœopathy in their several States.

SECT. 4. Any foreign homœopathic physician may be elected a Corresponding Member of the Institute at any meeting; and the Institute may, at any annual meeting, elect as Honorary Members, not to exceed five in one year, any foreign homœo.

pathic physicians who may be judged worthy, from their superior attainments in medicine; provided that the names of persons proposed for Honorary Membership shall have been presented at a previous annual meeting. Such Corresponding and Honorary Members shall not be entitled to vote, nor be eligible to office.

SECT. 5. Members shall be required to pay annually the sum of three dollars towards defraying the expenses of the Institute.

ARTICLE X.

SECT. 1. There shall be a Bureau of *Materia Medica*, Pharmacy, and Provings, consisting of nine members, which shall obtain facts relating to the *materia medica* and pharmacy; and institute, collect, and arrange provings of drugs.

SECT. 2. There shall be a Bureau of Clinical Medicine, consisting of nine members, which shall collect facts relating to clinical medicine generally, and especially to any endemic or epidemic diseases which may exist in the country.

SECT. 3. There shall be a Bureau of Obstetrics, and Diseases of Women and Children, consisting of seven members, which shall collect and report to the Institute facts and observations on subjects pertaining thereto.

SECT. 4. There shall be a Bureau of Surgery, consisting of nine members, which shall collect all improvements in surgery and surgical means, especially in connection with homœopathic treatment.

SECT. 5. There shall be a Bureau of Organization, Registration, and Statistics, which shall keep a register of all homœopathic physicians, or those who claim to be such, in the United States, distinguishing those who are members of the Institute, and also members of State societies; prepare a list of all State and local societies, colleges, hospitals, dispensaries, and journals, with their organization; and collect any statistics regarding homœopathy, its status and progress.

SEC. 6. There shall be a Bureau of Anatomy, Physiology, and Hygiene, consisting of seven members, which shall report to the Institute the advances made in these departments of medical science.

Each of these Bureaus, unless otherwise provided, shall consist of five members, to be appointed annually by the President with the advice of the other members of the Executive Committee; and, if any member of a bureau shall resign, or decline to serve, the Chairman of the bureau shall fill the vacancy, and notify the General Secretary of the fact.

The Chairmen of similar bureaus in State societies, represented in the Institute, shall be *ex officio* Corresponding Members of these bureaus.

ARTICLE XI.

Diplomas shall be granted to such as are already members of the Institute, on the payment of one dollar, and to new members on the payment of two dollars.

ARTICLE XII.

These By-laws may be altered or amended by a vote of a majority of members present at any annual meeting.

MEMBERS.

The ? denotes that the residence is doubtful; the figures show the date of membership.

Members are requested to inform the General Secretary of any change in the address of any of the members.

The following resolution, passed June, 1866, went into effect June, 1867:

Resolved, That members who are three years in arrears, and who do not pay within one year after being so notified by the Treasurer, shall be considered as having forfeited membership, and their names shall be stricken from the list.

ALABAMA.

1844. Lingen, George, M.D.....Mobile.

CALIFORNIA.

1867. Albertson, J. A., M.D.....San Francisco.
 1850. Clark, J. K., M.D.....Sacramento.
 1858. Dinsmore, J. Pitman, M.D.....8 O'Farrell St., San Fran.
 1860. Fox, John W., M.D.....San Francisco.
 1859. Geary, John F., M.D.....632 Howard St., San Francisco.
 1867. Poulson, Peter William, M.D..12 Montgomery St., San Fran.

CONNECTICUT.

1857. Bell, William C., M.D.....Middletown.
 1867. Brown, Henry P., M.D.....Waterbury.
 1867. Browne, Gardner S., M.D.....Hartford.
 1859. Bulkley, Dr. William E.....Danbury.
 1851. Dennison, Jeremiah T., M.D.....Fairfield.
 1851. Foote, Charles C., M.D.....New Haven.
 1850. Foote, Elial T., M.D.....New Haven.
 1854. Green, Geo. S., M.D.....Hartford.
 1867. Holcomb, N. Webster, M.D.....Farmer's Village.
 1867. Knight, Elam C., M.D.....Waterbury.
 1848. Norton, Lucian H., M.D.....Bridgeport.
 1867. Phillips, Albert William, M.D.....Birmingham.

1849. Rodman, William W., M.D. New Haven.
 1848. Skiff, Charles H., M.D. New Haven.
 1858. Stone, Henry E., M.D. Fairhaven.
 1867. Swift, Solomon E., M.D. Colchester.
 1848. Taft, Charles A., M.D. Hartford.
 1867. ?Wadsworth, T. D., M.D. Southington.
 1859. Wilson, G. H., M.D. West Meriden.

DELAWARE.

1867. Negendank, Augustus, M.D. Wilmington.

DISTRICT OF COLUMBIA.

1853. Brainerd, Jehu, M.D. Washington.
 1867. Hale, Wm., M.D. 213 Penn. Ave., Washington.
 1844. Piper, J. R., M.D. 382 H. St., Washington.
 1867. Sonnenschmidt, C. W., M.D. Washington.
 1858. Verdi, Tullio S., M.D. 268 G St., Washington.

GEORGIA.

1867. Cleaveland, William L., M.D. Atlanta.
 1868. Hunt, Samuel P., M.D. Augusta.
 1859. Orme, F. H., M.D. Savannah.

ILLINOIS.

1868. Bacmeister, Theodore, M.D. Toulon.
 1868. Bancroft, Walton, M.D. La Salle.
 1867. Barker, William C., M.D. Waukegan.
 1868. Barrows, Geo. S., M.D. Rockford.
 1857. Bartlett, A. R., M.D. Aurora.
 1857. Beebe, Gaylord D., M.D. Chicago.
 1867. Bell, James S., M.D. Joliet.
 1867. Brooks, John B., M.D. Geneseo.
 1867. Bumstead, S. J., M.D. Pekin.
 1857. Colton, D. A., M.D. Chicago.
 1854. Cooke, N. F., M.D. 182 N. State St., Chicago.
 1866. Duncan, T. Cation, M.D. Chicago.
 1868. Garvin, J. Paul, M.D. Alton.
 1865. Hale, Edwin M., M.D. 65 Twenty-second St., Chicago.
 1868. Hedges, S. P., M.D. Chicago.
 1868. Hempstead, W. C. F., M.D. Virden.

1857. Holt, Aaron P., M.D.....Lyndon.
 1867. Hoyne, Temple S., M.D.....Chicago.
 1868. Jackson, W. M., M.D.....Chicago.
 1868. Johnson, P. E., M.D.....Alton.
 1857. Kellogg, John L., M.D.....Chicago.
 1865. Kneipcke, E., M.D.....Chicago.
 1868. Loelkes, George, M.D.....Belleville.
 1868. Lord, Frederic A., M.D.....Chicago.
 1868. Ludlam, Edw. M. P., M.D.....Chicago.
 1857. Ludlam, Reuben, M.D.....Chicago.
 1868. Mann, O. H., M.D.....Evanston.
 1867. Mason, S. R., M.D.....Sheffield.
 1848. Miller, Adam, M.D.....Chicago.
 1866. Mitchell, J. S., M.D.....66 Randolph St., Chicago.
 1867. Munsey, Barton, M.D.....Virden.
 1867. Nute, T. Riker, M.D.....Chicago.
 1867. Pratt, Leonard, M.D.....Wheaton.
 1857. Shipman, Geo. E., M.D.....Chicago.
 1846. Small, Alvin E., M.D.....124 S. Clark St., Chicago.
 1868. Small, Alvin E., jr. M.D.....124 S. Clark St., Chicago.
 1868. Small, Henry N., M.D.....124 S. Clark St., Chicago.
 1848. Smith, D. S., M.D.....Chicago.
 1867. Wilbur, C. A., M.D.....Chicago.

INDIANA.

1867. Baer, O. P., M.D.....Richmond.
 1868. Eggert, William, M.D.....Indianapolis.
 1865. Holland, H. N., M.D.....Jeffersonville.
 1853. Hutchinson, J. B., M.D.....Madison.
 1868. Peck, Edwin H., M.D.....Vincennes.
 1868. Whiting, Samuel C., M.D.....Vincennes.

IOWA.

1866. Coggsowell, C. H., M.D... Clinton.
 1850. Foote, George F., M.D.....Dubuque.
 1857. Guilbert, Edward A., M.D.....Dubuque.
 1867. Hill, Robert L., M.D.....Dubuque.
 1867. Pearson, Clement, M.D.....Mt. Pleasant.
 1868. Seidlitz, Geo. N., M.D.....Keokuk.

KANSAS.

1868. Mayer, Martin, M.D. Leavenworth.

KENTUCKY.

1860. Cushing, J. F., M.D. Covington.
 1865. Gunkle, Henry, M.D. Newport.
 1865. Haynes, J. Russ, M.D. Newport.
 1865. Hunt, W. H., M.D. Covington.

LOUISIANA.

1846. Burritt, A. H., M.D. New Orleans.
 1860. Holcombe, Wm. H., M.D. 229 Camp St., New Orleans.

MAINE.

1868. Bell, James B., M.D. Augusta.
 1846. Bradford, Richmond, M.D. Auburn.
 1846. Clark, Eliphalet, M.D. Portland.
 1848. Cummings, J. M., M.D. Portland.
 1847. Dodge, Moses, M.D. Portland.
 1859. Eaton, Hosea B., M.D. Rockport.
 1848. Gallupe, William, M.D. Bangor.
 1867. Hinks, E. F., M.D. Thomaston.
 1859. Jefferds, George P., M.D. Bangor.
 1868. Morrill, G. H., M.D. Augusta.
 1867. Payne, Frederick W., M.D. Bath.
 1844. Payne, William E., M.D. Bath.
 1858. Pulsifer, M. R., M.D. Ellsworth.
 1867. Seymour, D. E., M.D. Calais.
 1847. Shackford, Rufus, M.D. Portland.
 1859. Thompson, W. L., M.D. Augusta.

MARYLAND.

1860. Buckner, Charles S., M.D. 12 Cathedral St., Baltimore.
 1868. Doran, Charles R., M.D. Hagerstown.
 1852. Hammond, Milton, M.D. 57 N. Paca St., Baltimore.
 1857. Martin, Jos. Lloyd, M.D. Mt. Vernon Place, Baltimore.
 1844. McManus, F. R., M.D. 27 Sharpe St., Baltimore.
 1848. Middleton, J. D., M.D. 98 Saratoga St., Baltimore.
 1867. Price, Elias C., M.D. Baltimore.

1844. Schmidt, J., M.D.....96 Eutaw St., Baltimore.
 1867. Shearer, Thomas, M.D... ..Baltimore.

MASSACHUSETTS.

1851. Abbott, Jehiel, M.D.....Westfield.
 1860. Ahlborn, Henry, M.D.....76 Charles St., Boston.
 1868. Alvord, Samuel, M.D.....Chicopee Falls.
 1853. Angell, Henry C., M.D.....16 Beacon Street, Boston.
 1867. Bailey, J. B., M.D.....Charlestown.
 1868. Baird, Wm. P., M.D.....Boston.
 1848. Barrows, George, M.D.....Taunton.
 1859. Bellows, Albert J., M.D.....90 Springfield St., Boston.
 1859. Brooks, Charles A., M.D.. ..Clinton.
 1860. Brown, Josiah, M.D.....Lynn.
 1859. Burpee, John A., M.D.....Malden.
 1868. Butman, Geo. F., M.D.....3 Dover St., Boston.
 1854. Cate, Shadrach M., M.D.....Salem.
 1859. Chamberlain, William B., M.D.....Worcester.
 1847. Chase, Hiram L., M.D.....Cambridge.
 1844. Clark, Luther, M.D.....37 Pinckney St., Boston.
 1854. Clarke, Henry B., M.D.....New Bedford.
 1859. Clarke, John L., M.D.....Fall River.
 1851. Collins, H. A., M.D.....Springfield.
 1859. Cullis, Charles, M.D.....18 Ashburton Place, Boston.
 1867. Cushing, Alvin M., M.D... ..Lynn.
 1859. De Gersdorff, B., M.D.....58 Pinckney St., Boston.
 1859. Dennett, George Wm., M.D....South Framingham.
 1859. Farnsworth, Charles H., M.D.....E. Cambridge.
 1844. Fuller, Milton, M.D.....35 Essex St., Boston.
 1859. Gale, Stephen M., M.D.....Newburyport.
 1851. Gambell, W. P., M.D.....2 Rutland St., Boston.
 1847. Geist, C. F.....2 Franklin Square, Boston.
 1844. Gregg, Samuel, M.D.....35 Howard St., Boston.
 1867. Harding, Evan B., M.D.....Northampton.
 1859. Harding, Wm. F., M.D.....Greenfield.
 1859. Harris, John T., M.D.....Roxbury.
 1867. Hedenberg, James, M.D.....Medford.
 1867. Hemenway, Horace P., M.D.....E. Somerville.
 1846. Holt, Daniel, M.D.....Lowell.

1868. Hunt, David, jr., M.D. Worcester.
 1859. Johnson, Daniel A., M.D. 20 Worcester St., Boston.
 1854. Jones, Elijah U., M.D. Taunton.
 1865. Krebs, Francis H., M.D. 63 Chauncy St., Boston.
 1867. Lewis, William H., M.D. 36 Newton St., Boston.
 1858. Lougee, Wm. H., M.D. Lawrence.
 1858. Macfarland, Lafayette, M.D. . 1492 Washington St., Boston.
 1859. Matthes, G. Felix, M.D. New Bedford.
 1858. Morrill, Ezekiel, M.D. Salem.
 1867. Morrill, Henry B., M.D. 58 Beach St., Boston.
 1867. Morse, Nathan R., M.D. Salem.
 1859. Neilson, James C., M.D. Charlestown.
 1859. Nichols, Lemuel B., M.D. 102 Main St., Worcester.
 1867. Osborne, James H., M.D. Newton.
 1868. Packard, Liberty D., M.D. So. Boston.
 1853. Paine, Joseph P., M.D. 659 Shawmut Av., Boston.
 1856. Palmer, Frederick N., M.D. Newton.
 1860. Payne, James H., M.D. 1262 Washington St., Boston.
 1851. Pearson, William, M.D. S. Hadley Falls.
 1868. Pease, Giles M., M.D. Boston.
 1867. Pike, Joseph G. W., M.D. 103 Camden St., Boston.
 1848. Russell, George, M.D. 14 Lynde St., Boston.
 1859. Sanders, Orren S., M.D. 11 Bowdoin St., Boston.
 1847. Sawyer, B. E., M.D. Haverhill.
 1867. Scales, Edward P., M.D. Newton.
 1859. Scales, Thomas S., M.D. Woburn.
 1867. Shattuck, Henry P., M.D. 645 Washington St., Boston.
 1859. Sherman, John H., M.D. Middleborough.
 1854. Sisson, Edward R., M.D. New Bedford.
 1867. Sisson, William H. H., M.D. New Bedford.
 1859. Spencer, Charles L., M.D. New Bedford.
 1868. Squier, A. F., M.D. 664 Washington St., Boston.
 1844. Swazey, George W., M.D. Springfield.
 1853. Talbot, I. Tisdale, M.D. 31 Mt. Vernon St., Boston.
 1847. Thayer, David, M.D. 58 Beach St., Boston.
 1858. Turner, John, M.D. 725 Tremont St., Boston.
 1854. Walker, Charles H., M.D. Chelsea.
 1844. Weld, C. M., M.D. Norfolk House, Boston Highlands.
 1859. Wesselhoeft, Conrad, M.D. 57 Chauncy Street, Boston.
 1859. Wesselhoeft, Wm. P., M.D. 42 Chauncy St., Boston.

1854. Wilder, Daniel, M.D. New Bedford.
 1859. Woodbury, John Harvey, M.D. 58 Temple St., Boston.
 1868. Woods, J. U., M.D. Holyoke.
 1868. Woodvine, D. G., M.D. 733 Tremont St., Boston.

MINNESOTA.

1860. Alley, James T., M.D. St. Paul.
 1857. Hatch, Philo L., M.D. Minneapolis.

MISSISSIPPI.

1868. Davis, F. A. W., M.D. Natchez.

MICHIGAN.

1868. Calvert, William J., M.D. Ann Arbor.
 1867. Craig, J. D., M.D. Niles.
 1867. Drake, E. H., M.D. Detroit.
 1857. Harris, Charles Taylor, M.D. Ann Arbor.
 1846. Hempel, Charles J., M.D. Grand Rapids.
 1866. Lodge, Edwin A., M.D. 51 Wayne St., Detroit.
 1854. Pomeroy, Thomas F., M.D. Congress St., Detroit.
 1860. Reed, Jacob, jr., M.D. Grand Rapids.
 1867. Rice, Nathaniel B., M.D. East Saginaw.
 1853. Walker, A., M.D. Pontiac.
 1857. Woodruff, Francis, M.D. Ann Arbor.

MISSOURI.

1868. Bristol, Bennett J., M.D. Webster Groves.
 1868. Chase, Henry S., M.D. St. Louis.
 1866. Comstock, T. G., M.D. 14th St. and Wash. Av., St. Louis.
 1867. Foster, Wm. D., M.D. Hannibal.
 1867. Franklin, E. C., M.D. St. Louis.
 1865. Frost, James H. P., M.D. St. Louis.
 1868. Gunderlach, Charles H., M.D. St. Louis.
 1866. Hartmann, J., M.D. 413 N. Eleventh St., St. Louis.
 1853. Helmuth, Wm. T., M.D. 1418 Wash. Ave., St. Louis.
 1868. Luyties, D. R., M.D. St. Louis.
 1868. Nibelung, Chas. H., M.D. St. Louis.
 1868. Parsons, Scott B., M.D. St. Louis.
 1868. Phelan, R. A., M.D. St. Louis.
 1867. Skeels, A. P., M.D. St. Louis.

1868. Temple, John T., M.D. St. Louis.
 1868. Tirrell, N. D., M.D. St. Louis.
 1868. Vastine, Chas., M.D. St. Louis.
 1868. Vastine, Thos. J., M.D. St. Louis.

NEBRASKA.

1860. Wood, O. S., M.D. Omaha.
 1853. Wright, A. S., M.D. Omaha.

NEVADA.

1859. Wild, Edward A., M.D. Austin.

NEW HAMPSHIRE.

1868. Gallinger, Jacob H., M.D. Concord.
 1847. Hinds, W. H. H., M.D. Milford.
 1846. Morrill, Alpheus, M.D. Concord.
 1866. Morrill, Shadrach C., M.D. Concord.
 1847. Peterson, James, M.D. Weare.
 1867. Whittle, James Peterson, M.D. Weare.
 1847. Whittle, Joshua F., M.D. Nashua.

NEW JERSEY.

1846. Annin, J. D., M.D. Newark.
 1867. Bailey, George W., M.D. Elizabeth.
 1845. Boardman, J. C., M.D. Trenton.
 1867. Bowen, Eleazer, M.D. Jersey City.
 1867. Bowen, Horace, M.D. Jersey City.
 1860. Clay, G. B. L., M.D. Moorestown.
 1867. Fairbanks, John N., M.D. Hightstown.
 1867. Fish, Chas. F., M.D. Newark.
 1849. Gardiner, Daniel R., M.D. Woodbury.
 1866. Homer, H., M.D. Plainfield.
 1867. Hunt, Henry F., M.D. Camden.
 1868. Jones, S. A., M.D. Englewood.
 1867. Kirkpatrick, Alexander, M.D. Burlington.
 1867. Macomber, Addison P., M.D. Hackensack.
 1867. McNeil, Daniel, M.D. Hudson City.
 1867. Mandeville, F. B., M.D. Newark.
 1860. Moore, Joseph, M.D. Bridgeton.
 1867. Nichols, Frank, M.D. Hoboken.
 1844. Paine, John A., M.D. Newark.

1846. Rhees, Morgan J., M.D..... Mount Holly.
 1868. Tibbles, Geo. N., M.D... Hudson City.
 1867. Tompkins, Silas B., M.D..... Newark.
 1844. Ward, Isaac M., M.D... Newark.
 1844. Ward, Walter, M.D..... Mount Holly.
 1867. Webb, E. Cook, M.D..... Orange.
 1853. Wilkinson, Ross M., M.D..... 97 E. State St., Trenton.
 1865. Wilson, Pusey, M.D..... Moorestown.
 1858. Youlin, John J., M.D..... 130 Grove Street, Jersey City.

NEW YORK.

1866. Allen, Timothy F., M.D.... 105 Fourth Avenue, New York.
 1867. Andrews, Joel R., M.D... 52 W. Twenty-ninth St., New York.
 1867. Avery, Henry N., M.D..... Poughkeepsie.
 1857. Baldwin, Jared G., M.D. 22 E. Twenty-fourth St., N. York.
 1844. Ball, Alonzo S., M.D..... 43 W. Eleventh St., New York.
 1866. Baner, Wm. J., M.D.. Fourth Av. and Nineteenth St., N. Y.
 1844. Barlow, Samuel B., M.D... 55 E. Twenty-first St., N. York.
 1867. Bartlett, Edward G., M.D... 80 W. Eleventh St., N. York.
 1847. Baxter, William, M.D..... Wappinger's Falls.
 1846. Bayard, Edward, M.D... 6 W. Fourteenth St., New York.
 1867. Bayliss, B. L. B., M.D..... Astoria.
 1859. Beakley, Henry, M.D..... Peekskill.
 1848. Beakley, Jacob, M.D... Grammercy Park House, New York.
 1846. Belcher, George E., M.D.. 43 E. Twenty-first St., New York.
 1867. Benedict, Harris S., M.D..... Corning.
 1846. Bennet, Hilem, M.D... Rochester.
 1865. Benson, P. Oscar C., M.D..... Skaneateles.
 1858. Berghaus, Julius M., M D... 49 West 24th St., New York.
 1854. Bigelow, Franklin, M.D..... 102 S. Salina St., Syracuse.
 1854. Bigelow, J. G., M.D..... Syracuse.
 1866. Billings, George H., M.D... 7 Hanson Place, Brooklyn.
 1854. Bishop, D. F., M.D..... Lockport.
 1853. Bissell, Arthur F., M.D..... 157 Maiden Lane, New York.
 1867. Blakelock, Ralph, M.D.. 410 W. Twenty-fourth St., New York.
 1854. Blanchard, Henry C., M.D... Buffalo.
 1844. Bowers, Benjamin F., M.D... 23 E. Twentieth St., New York.
 1866. Boyce, C. William, M.D..... Auburn.
 1860. Bradford, F. Standish, M.D... 108 Fourth Av., New York.
 1867. Brey, Julius C., M.D..... New York.

1867. Brink, William, M.D. . . . 55 E. Twenty-first St., New York.
 1867. Brown, Edward V., M.D. Tarrytown.
 1867. Brown, Titus L., M.D. Binghamton.
 1855. Bryant, Joel, M.D. 31 Smith St., Brooklyn.
 1867. Bryant, Melville, M.D. 31 Smith St., Brooklyn.
 1856. Bull, A. T., M.D. Buffalo.
 1868. Burchard, J. Gregg, M.D. Peekskill.
 1867. Burdick, Stephen P., M.D. . . . 303 W. 34th St., New York.
 1848. Burke, A. C., M.D. 142 Union St., Brooklyn.
 1867. Burnett, Benajah J., jr., M.D. Mount Vernon.
 1867. Campbell, C. E., M.D. 19 Second Ave., New York.
 1844. Cator, H. Hull, M.D. Kingston.
 1867. Cetlinski, Beloit, M.D. 101 E. Twelfth St., New York.
 1845. Clary, Lyman, M.D. Syracuse.
 1852. Clements, Zina, M.D. Saratoga.
 1867. Comstock, Albert L., M.D. Mount Kisco.
 1848. Cook, Abijah P., M.D. Hudson.
 1867. Cook, E. G., M.D. Buffalo.
 1867. Cook, Elliot L., M.D. Buffalo.
 1850. Cook, Simeon A., M.D. Troy.
 1855. Dake, C. A., M.D. Albion.
 1847. Dake, C. M., M.D. Rochester.
 1860. Dake, Jabez W., M.D. Albion.
 1868. Dayfoot, Herbert M., M.D. Mt. Morris.
 1848. Donovan, Thomas W., M.D. . . . Quarantine, Staten Island.
 1867. Dowling, John W., M.D. . . 58 W. Twenty-fifth St., New York.
 1860. Dunham, Carroll, M.D. . . . 68 E. Twelfth Street, New York.
 1867. Ermentraut, John P., M.D. . 194 Seventh Street, New York.
 1857. Ellis, John, M.D. . . . 263 W. Fifty-fourth Street, New York.
 1867. Evans, Jos. T., M.D. . . . 27 E. Thirty-first St., New York.
 1867. Everitt, Daniel L., M.D. . . . 29 Madison St., Brooklyn.
 1867. Fanning, Thomas C., M.D. Tarrytown.
 1867. Fellows, H. Barton, M.D. Aurora.
 1868. Finch, Edwin W., M.D. New Rochelle.
 1855. Fincke, B., M.D. 92 Livingston St., Brooklyn.
 1867. Fiske, W. M. L., M.D. Rochester.
 1867. Flagg, Levi W., M.D. Yonkers.
 1858. Freeman, W., M.D. . . . 43 W. Twenty-fourth St., New York.
 1858. Freligh, Martin, M.D. 128 Ninth Street, New York.
 1858. Füllgraff, Otto, M.D. 41 E. Fifteenth St., New York.

1865. Garside, W. B., M.D...Greene Av. and Hall St., Brooklyn.
 1867. Goodwin, Thomas S., M.D..Port Richmond, Staten Island.
 1844. Gray, John F., M.D.38 E. Twentieth St., New York.
 1855. Gregg, Rollin R., M.D.,.....237 Washington St., Buffalo.
 1848. Guernsey, Eghert, M.D..18 W. Twenty-third St., New York.
 1847. Guy, Samuel S., M.D.....New York.
 1859. Hall, Geo. A., M.D.....Westfield.
 1846. Hallock, Lewis, M.D.....92 Madison Ave., New York.
 1847. Hamilton, O. D., M.D.....Mount Morris.
 1868. Hasbrouck, Stephen, M.D.....New York.
 1867. Hawks, John, M.D.20 Jefferson St., Brooklyn.
 1858. Hawley, L. B., M.D.....Waverley.
 1867. Heurtley, Walter R., M.D.....Newburgh.
 1867. Hitchcock, H. M., M.D..22 E. Twenty-fourth St., New York.
 1867. Hocking, Wm. F., M.D.....Washington Heights.
 1858. Hofman, Ernst F., M.D....40 E. Thirtieth St., New York.
 1867. Holtby, Jabez B., M.D...E. Twenty-second St., New York.
 1867. Hornby, John, M.D.....Poughkeepsie.
 1866. Horwitz, William, M.D.....New York.
 1858. Hotchkiss, J. T., M.D.....Monroe.
 1859. Houghton, H. A., M.D.....Keeseville.
 1867. Houghton, Henry C., M.D....P. O. Box 4700, New York.
 1846. Hull, A. Cooke, M.D.....105 Joralemon St., Brooklyn.
 1867. Hund, H. B., M.D.....23 Hester St., New York.
 1867. Hunt, F. W., M.D.....New York.
 1867. Ingalls, F. W., M.D.....Kingston.
 1867. Jayne, DeWitt C., M.D.....Florida.
 1867. Jones, Henry C., M.D.....Mount Vernon.
 1853. Joslin, Benj. F., M.D..52 W. Twenty-ninth St., New York.
 1867. Keep, J. Lester, M.D. Cor. Gates & Vand'lt Avs., Brooklyn.
 1848. Keep, Lester, M.D.. Cor. Gates & Vand'lt Avs., Brooklyn.
 1858. Kellogg, Edwin M., M.D..21 E. Twentieth St., New York.
 1853. Kenyon, L. M., M.D.86 W. Mohawk St., Buffalo.
 1844. Kimball, David S., M.D.....Sackett's Harbor.
 1867. Kuhn, Carl W., M.D.....59 Bond St., New York.
 1867. Liebold, C. Theo., M.D..57 E. Twenty-first St., New York.
 1867. Lilienthal, S., M.D....230 W. Twenty-fifth St., New York.
 1846. Lovejoy, Ezekiel, M.D.....Owego.
 1867. Lowry, Charles, M.D.....Greenwich.
 1844. Mairs, James, M.D...43 W. Twenty-fourth St., New York.

1848. Marcy, Erastus E., M.D....26 E. Twenty-second St., N. Y.
 1866. McMurray, Robert, M.D...192 Second Avenue, New York.
 1867. Millard, Henry B., M.D....7 E. Twenty-seventh St., N. Y.
 1867. Miller, R. E., M.D..... Oxford.
 1858. Minton, Henry, M.D.....138 Remsen St., Brooklyn.
 1868. Mitchell, Geo. B. I., M.D.....New York.
 1866. Mitchell, John J., M.D....955 Second Avenue, New York.
 1867. Mitchell, J. W., M.D...19 W. Twenty-first St., New York.
 1867. Moffat, Reuben C., M.D.....Brooklyn.
 1867. Montanye, William D. S., M.DRondout.
 1855. Morgan, A. R., M.D.....10 Livingston Pl., New York.
 1858. Morrill, Henry E., M.D.....88 Orange St., Brooklyn.
 1848. Munger, Erastus A., M.D.....Waterville.
 1856. Ormes, Cornelius, M.D.....Jamestown.
 1844. Paine, Henry D., M.D.....229 Fifth Ave., New York.
 1850. Paine, Horace M., M.D.....104 State St., Albany.
 1848. Palmer, Miles W., M.D..235 E. Eighteenth St., New York.
 1867. Pearsall, S. I., M.D.....Saratoga Springs.
 1858. Perrine, W. L. R., M.D.....83 Montague St., Brooklyn.
 1867. Pratt, William M., M.D....218 E. Broadway, New York
 1854. Randel, William H., M.D.....Albany.
 1848. Raymond, Jonas C., M.D.....252 Genesee St., Utica.
 1847. Richardson, E. T., M.D.....87 Montague St., Brooklyn.
 1844. Robinson, Horatio, M.D...Auburn.
 1858. Rosman, John G., M.D.....60 Pierrepont St., Brooklyn.
 1867. Seeley, N. R., M.D.....Elmira.
 1867. Shaffer, Levi, M.D...Kingston.
 1859. Shattuck, Alvin, M.D.....41 S. Division St., Buffalo.
 1853. Skiles, F. W., M.D.....86 Clinton St., Brooklyn.
 1867. Sloan, Henry N., M.D.....Binghamton.
 1866. Smith, Daniel D., M.D.....Spring Valley.
 1860. Smith, Henry M., M.D.....105 Fourth Avenue, N. Y.
 1860. Smith, Thomas Franklin, M.D..128th St., near 4th Av., N. Y.
 1867. Sommer, Gustave Justus Moritz, M.D....East New York.
 1868. Southwick, T. E., M.D.....Ogdensburg.
 1850. Springstead, David, M.D.....Albany.
 1865. Sumner, Charles, M.D.....Rochester.
 1867. Swan, Samuel, M.D....13 W. Thirty-eighth St., New York.
 1867. Thompson, J. H., M.D.....46 Union Square, New York.
 1867. Thompson, Virgil, M.D.....41 Barrow St., New York.

1856. Ward, John A., M.D.....20 East 21st St., New York.
 1857. Ward, Joseph B., M.D...Cor. Bedf'd Av. & B'way, Brooklyn.
 1848. Warner, Lewis T., M.D...39 E. Nineteenth St., New York.
 1854. Watson, William H., M.D.....270 Genesee St., Utica.
 1848. Wells, Lucien B., M.D.....225 Genesee St., Utica.
 1844. Wells, P. P., M.D.....84 Clinton St., Brooklyn.
 1858. West, Edwin, M.D...42 W. Washington Place, New York.
 1866. Wetmore, John M., M.D. 43 E. Twenty-first St., New York.
 1867. White, J. Ralsey, M.D.....1915 Third Av., New York.
 1860. White, Theodore C., M.D.....Rochester.
 1867. White, W. Hanford, M.D. 26 E. Twenty-second St., N. Y.
 1855. Wilder, Louis de V., M.D.....82 W. 29th St., New York.
 1858. Wright, Albert, M.D...Cor. Bedf'd Av. & B'way, Brooklyn.
 1867. Wright, Wm., M.D.....34 Fifth Street, Brooklyn, E. D.

NORTH CAROLINA.

1860. Freeman, Wm. E., M.D.... ..Wilmington.

OHIO.

1853. Barnes, George W., M.D.....Cleveland.
 1868. Baxter, H. H., M.D.....Columbus.
 1865. Beckwith, D. H., M.D.....Cleveland.
 1857. Beckwith, Seth R., M.D.....Cleveland.
 1868. Biggar, Hamilton F., M.D.....Cleveland.
 1850. Bigler, G. W., M.D.....Cincinnati.
 1865. Bradford, T. C., M.D.....170 W. Fourth St., Cincinnati.
 1865. Bronson, Charles C., M.D.....Cincinnati.
 1865. Caldwell, S. N., M.D.....Piqua.
 1865. Coffeen, J. Q. A., M.D.....Springdale.
 1865. Cropper, Charles, M.D.....Cincinnati.
 1852. Dake, Jabez P., M.D.....Salem.
 1865. Ehrman, A. H., M.D...46 W. Seventh Street, Cincinnati.
 1846. Ehrman, Benjamin, M.D...46 W. Seventh St., Cincinnati.
 1849. Ehrman, C., M.D.....Cincinnati.
 1846. Ehrman, F., M.D.....87 W. Seventh Street, Cincinnati.
 1865. Fuller, James M., M.D.....253 Richmond St., Cincinnati.
 1866. Graham, Wm. G., M.D.....Canton.
 1865. Harpell, J., M.D.....426 John St., Cincinnati.
 1865. Hartshorn, D. W., M.D.....Cincinnati.
 1865. Hunt, James G., M.D.....100 W. Ninth St., Cincinnati.

1868. Hunter, A. O., M.D. Mansfield.
 1853. Johnson, J. M., M.D. Cleveland.
 1866. Keyes, A. E., M.D. Ravenna.
 1865. Lynde, Robert R., M.D. Cincinnati.
 1865. Owens, William, M.D. Cincinnati.
 1853. Parks, Jesse M., M.D. Hamilton.
 1844. Pulte, Joseph H., M.D. Cincinnati.
 1865. Rush, R. B., M.D. 120 Main St., Salem.
 1860. Sanders, John C., M.D. Cleveland.
 1868. Schneider, N., M.D. Cleveland.
 1846. Shepard, A., M.D. Glendale.
 1860. Thomas, E. B., M.D. 119 W. Ninth St., Cincinnati.
 1853. Turrill, M. Y., M.D. Cleveland.
 1866. Verdi, Ciro S., M.D. 17 Monument Sq., Cleveland.
 1865. Webster, W., M.D. 127 Main St., Dayton.
 1867. Wheeler, Alexander W., M.D. Cleveland.
 1865. Wilson, T. P., M.D. Cleveland.

PENNSYLVANIA.

1858. Ashton, A. H., M.D. 730 S. Tenth Street, Philadelphia.
 1866. Barnaby, J. E., M.D. Allegheny City.
 1846. Belt, R. G., M.D. Philadelphia.
 1846. Berens, Bernard, M.D. 909 Arch Street, Philadelphia.
 1846. Berens, Joseph, M.D. 513 North Sixth St., Philadelphia.
 1865. Blakely, William J., M.D. Benzinger, Elk Co.
 1865. Boericke, F. E., M.D. 635 Arch Street, Philadelphia.
 1866. Borland, W. C., M.D. Pittsburg.
 1860. Brooks, Silas S., M.D. 140 N. Twelfth St., Philadelphia.
 1867. Bunting, Thomas C., M.D. Mauch Chunk.
 1854. Burgher, J. C., M.D. 332 Penn St., Pittsburg.
 1865. Childs, W. R., M.D. 208 Penn St., Pittsburg.
 1866. Cook, William H., M.D. Carlisle.
 1866. Cooper, Frank B., M.D. Allegheny City.
 1866. Cooper, J. F., M.D. Allegheny City.
 1856. Côté, Marcellin, M.D. 284 Penn St., Pittsburg.
 1865. Cowley, David, M.D. 298 Penn St., Pittsburg.
 1866. Dake, B. F., M.D. 300 Penn St., Pittsburg.
 1844. Detwiller, H., M.D. Easton.
 1858. Detwiller, J. J., M.D. Easton.
 1866. Earheart, J. R., M.D. 125 N. Seventeenth St., Philadelphia.

1866. Faulkner, R., M.D.....Erie.
 1866. Foster, G. S., M.D..... Allegheny City.
 1866. Friese, M., M.D Harrisburg.
 1846. Gardiner, Richard, M.D... 526 Spruce Street, Philadelphia.
 1846. Guernsey, Henry N., M.D..... 1423 Chestnut St., Phila.
 1852. Guernsey, Wm. F., M.D..... 4430 Frankford Ave., Phila.
 1867. Gumpert, B. B., M.D. Cor. Frank' and Parrish Sts., Phila.
 1846. Helmuth, Wm. S., M.D.... 312 S. Tenth St., Philadelphia.
 1844. Hering, Constantine, M.D..... 112 N. Twelfth St., Phila.
 1856. Herron, James A., M.D..... 12 Smithfield St., Pittsburg.
 1865. Hewitt, Thomas, M.D..... Allegheny City.
 1854. Hofman, H. H., M.D..... 216 Penn St., Pittsburg.
 1854. Houard, John G., M.D.... 402 S. Broad St., Philadelphia.
 1859. James, Bushrod W., M.D.... 609 N. 18th St., Philadelphia.
 1846. James, D., M.D..... 1013 Green Street, Philadelphia.
 1846. James, Isaac, M.D... Bustleton.
 1866. James, J. E., M.D..... 1013 Greene Street, Philadelphia.
 1844. Jeanes, Jacob, M.D..... 519 Vine Street, Philadelphia.
 1858. Jones, Joseph E., M.D..... West Chester.
 1860. Johnson, Isaac D., M.D..... Kennet Square.
 1848. Koch, A. W., M.D..... 118 N. Twelfth St., Philadelphia.
 1868. Koch, Richard, M.D..... Philadelphia.
 1866. Lee, C. H., M.D..... Tarentum.
 1860. Lee, J. K., M.D.... S. W. cor. 38th & Chestnut Sts., Phila.
 1845. Lippe, Adolph, M.D... .. 1204 Walnut St., Philadelphia.
 1866. Logee, H. M., M.D..... Linesville.
 1868. Macfarlan, Malcolm, M.D..... Philadelphia.
 1860. Malin, John, M.D..... 4847 Main St., Germantown.
 1866. Marsden, J. H., M.D..... York Springs.
 1868. Martin, H. N., M.D..... 630 Spruce St., Philadelphia.
 1868. Marvin, C. H., M.D..... Philadelphia.
 1860. McClatchey, Robert J., M.D..... 916 N. Tenth St., Phila.
 1867. McClelland, J. H., M.D... Pittsburg.
 1860. McLeod, G. J., M.D..... 3905 Locust Street, Philadelphia.
 1860. Moore, Thomas, M.D : Germantown.
 1867. Morgan, John C., M.D..... Philadelphia.
 1844. Neidhard, Charles, M.D..... 1020 Arch St., Philadelphia.
 1866. Preston, Coates, M.D..... Chester.
 1865. Rankin, J. S., M.D 105 Fifth St., Pittsburg.
 1860. Reading, Edward, M.D..... Hatborough.

1848. Reading, J. R., M.D. Somerton.
 1857. Reed, William A., M.D. 123 N. Eleventh St., Phila.
 1866. Richards, J. C., M.D. Lock Haven.
 1866. Rousseau, L. M., M.D. 294 Penn St., Pittsburg.
 1866. Smedley, Robert C., M.D. West Chester.
 1867. Smith, William H., M.D. 815 Spruce St., Philadelphia.
 1860. Starkey, George R., M.D. 1713 Arch St., Philadelphia.
 1846. Stevens, C. A., M.D. Scranton.
 1852. Stevenson, T. Collins, M.D. Carlisle.
 1866. Stewart, Jacob, M.D. Sharpsburg.
 1866. Townsend, E. W., M.D. Greensburg.
 1860. Trites, David T., M.D. Manayunk.
 1867. Ure, Walter, M.D. Allegheny City.
 1848. Vinal, L. G., M.D. 958 N. Tenth St., Philadelphia.
 1865. Wallace, M. W., M.D. Allegheny City.
 1866. Werder, Max, M.D. Johnstown.
 1867. Willard, L. H., M.D. Allegheny City.
 1844. Williamson, Walter, M.D. . Cor. 11th & Filbert Sts., Phila.
 1857. Williamson, Walter M., M.D. . Cor. 11th & Filbert Sts., Phil.
 1867. Wood, Henry C., M.D. West Chester.
 1854. Wood, J. B., M.D. West Chester.
 1867. Zantzinger, Alfred, M.D. 300 South Tenth St., Phila.

RHODE ISLAND.

1846. Barrows, Ira, M.D. . . . Cor. Wash. & Mathewson Sts., Prov.
 1868. Budlong, John C., M.D. Centredale.
 1846. Clarke, Peleg, M.D. 21 Sufon St., Providence.
 1847. DeWolfe, John J., M.D. Providence.
 1844. Manchester, Charles F., M.D. . . . 29 Mills St., Pawtucket.
 1867. Sawin, Isaac W., M.D. Centredale.
 1856. Stevens, Grenville S., M.D. Providence.

TENNESSEE.

1866. Sheffield, H., M.D. 139 Broad Street, Nashville.

TEXAS.

1868. Angell, Edwin P., M.D. Galveston.

VERMONT.

1867. Currier, C. B., M.D. Middlebury.

1859. Sparhawk, George E. E., M.D.....Gaysville.
 1865. Woodhouse, Charles, M.D.....Rutland.

WISCONSIN.

1847. Douglas, J. S., M.D.....Milwaukee.
 1855. Gray, A. W., M.D.....Milwaukee.
 1857. Ober, L. E., M.D.....La Crosse.

NOVA SCOTIA.

1867. Wesselhoeft, Walter, M.D.....Halifax.

MISCELLANEOUS.

1859. Munde, Charles, M.D.....Würzburg, Germany.
 1858. Wackerbarth, T. von, M.D.....Germany.

CORRESPONDING MEMBER.

1868. Moore, John, M.D.....Liverpool, Eng.